

## Public Health Preparedness and Situational Awareness Report: #2020:26

Reporting for the week ending 06/27/20 (MMWR Week #26)

July 2nd, 2020

#### CURRENT HOMELAND SECURITY THREAT LEVELS

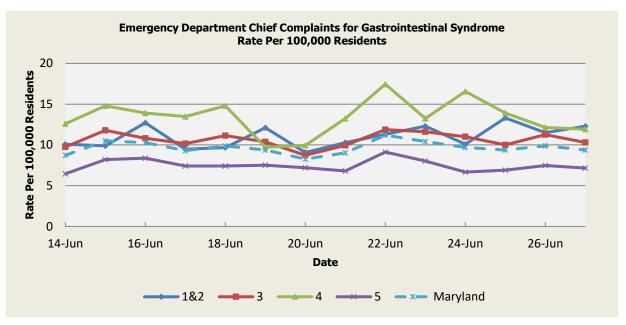
**National:** No Active Alerts

**Maryland: ENHANCED** (MEMA status)

#### SYNDROMIC SURVEILLANCE REPORTS

**ESSENCE** (Electronic Surveillance System for the Early Notification of Community-based Epidemics): Graphical representation is provided for all syndromes (excluding the "Other" category; see Appendix 1) by Health and Medical Regions (See Appendix 2). Emergency department chief complaint data is presented as rates per 100,000 residents using data from the 2010 census. Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE). Baltimore, MD: Maryland Department of Health; 2019.

# **Gastrointestinal Syndrome**

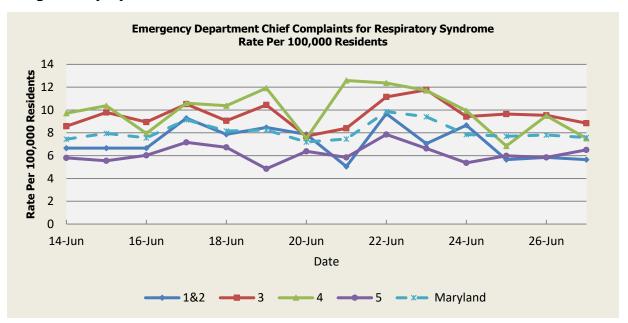


There was no Gastrointestinal Syndrome outbreak reported this week.

	Gastrointestinal Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2	3	4	5	Maryland		
Mean Rate*	13.27	14.97	15.89	10.22	13.08		
Median Rate*	13.11	14.83	15.46	10.17	13.02		

<sup>\*</sup> Per 100,000 Residents

## **Respiratory Syndrome**

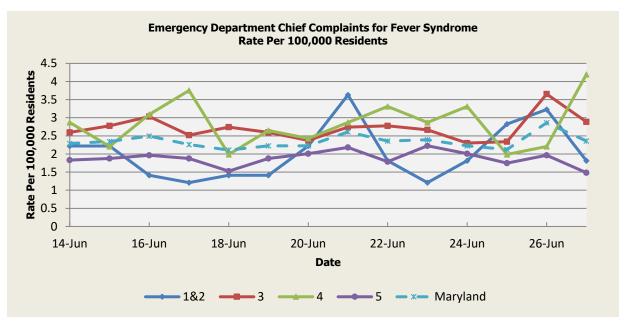


There were twenty five (25) Respiratory Syndrome outbreaks reported this week: seven (7) outbreaks of COVID-19 in Assisted Living Facilities (Region 3), two (2) outbreaks of COVID-19 in Correctional Facilities (Regions 1&2), three (3) outbreaks of COVID-19 in Group Homes (Region 3), two (2) outbreaks of COVID-19 in Hospitals (Region 3), one (1) outbreak of COVID-19 in a Nursing Home (Region 5), two (2) outbreaks of COVID-19 in Outpatient Clinics (Region 3), one (1) outbreak of COVID-19 in a Shelter (Region 5), six (6) outbreaks of COVID-19 in Substance Abuse Treatment Programs (Region 3), one (1) outbreak of COVID-19 in a Workplace (Region 3).

	Respiratory Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2	3	4	5	Maryland		
Mean Rate*	12.59	14.88	15.24	10.10	12.89		
Median Rate*	12.10	14.25	14.35	9.69	12.37		

<sup>\*</sup> Per 100,000 Residents

# **Fever Syndrome**

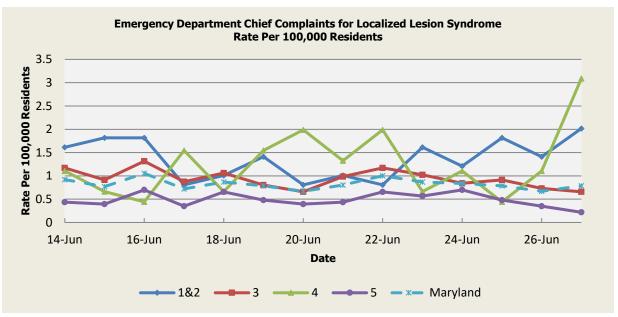


There were no Fever Syndrome outbreaks reported this week.

	Fever Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2	3	4	5	Maryland		
Mean Rate*	3.09	3.93	4.15	3.06	3.54		
Median Rate*	3.02	3.80	3.97	2.92	3.41		

\*Per 100,000 Residents

# **Localized Lesion Syndrome**

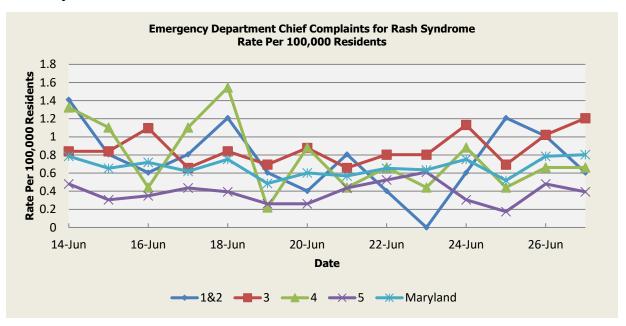


There were no Localized Lesion Syndrome outbreaks reported this week.

	Localized Lesion Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2	3	4	5	Maryland		
Mean Rate*	1.16	1.74	2.00	0.88	1.38		
Median Rate*	1.01	1.68	1.99	0.87	1.34		

<sup>\*</sup> Per 100,000 Residents

# **Rash Syndrome**

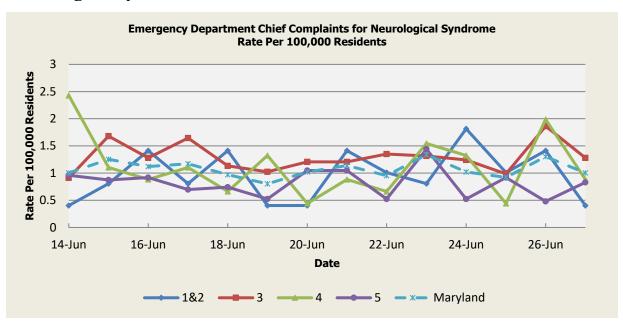


There was no Rash Syndrome outbreak reported this week.

	Rash Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2	3	4	5	Maryland		
Mean Rate*	1.23	1.63	1.71	0.95	1.34		
Median Rate*	1.21	1.57	1.55	0.92	1.31		

<sup>\*</sup> Per 100,000 Residents

# **Neurological Syndrome**

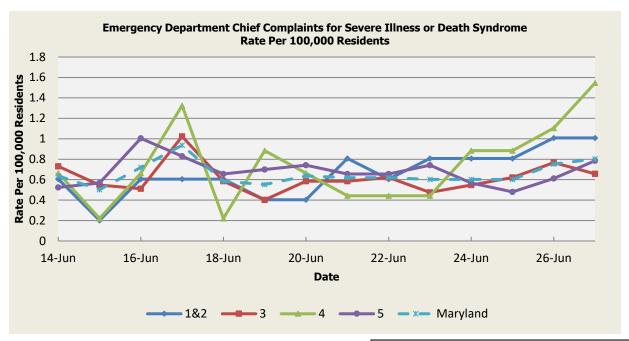


There were no Neurological Syndrome outbreaks reported this week.

	Neurological Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2	3	4	5	Maryland		
Mean Rate*	0.81	0.99	0.91	0.63	0.83		
Median Rate*	0.81	0.91	0.88	0.57	0.77		

<sup>\*</sup> Per 100,000 Residents

# **Severe Illness or Death Syndrome**



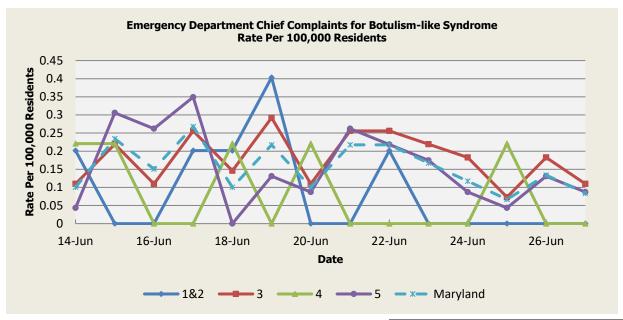
There were no Severe Illness or Death Syndrome outbreaks reported this week.

	Severe Illness or Death Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2	3	4	5	Maryland		
Mean Rate*	0.65	0.88	0.84	0.53	0.73		
Median Rate*	0.60	0.84	0.88	0.48	0.70		

<sup>\*</sup> Per 100,000 Residents

## SYNDROMES RELATED TO CATEGORY A AGENTS

# **Botulism-like Syndrome**

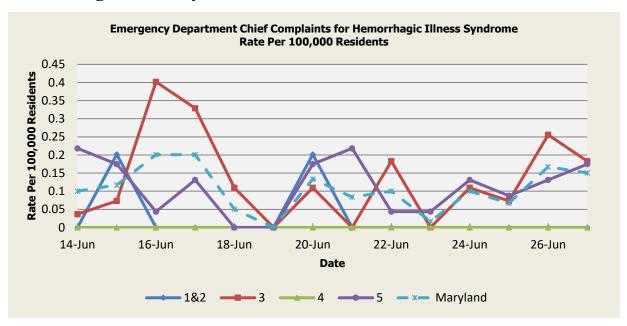


There was an appreciable increase above baseline in the rate of ED visits for Botulism-like Syndrome on, 6/14 (Regions 1&2,4), 6/15 (Regions 4,5), 6/16 (Region 5), 6/17 (Regions 1&2,5), 6/18 (Regions 1&2,4), 6/19 (Regions 1&2,3), 6/20 (Region 4), 6/21 (Region 5), 6/22 (Regions 1&2,5), 6/23 (Region 5), 6/25 ((Regions 1&2)). These increases are not known to be associated with any outbreaks.

	Botulism-like Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2 3 4 5 Maryland						
Mean Rate*	0.08	0.13	0.06	0.08	0.10		
Median Rate*	0.00	0.11	0.00	0.04	0.08		

<sup>\*</sup> Per 100,000 Residents

# Hemorrhagic Illness Syndrome

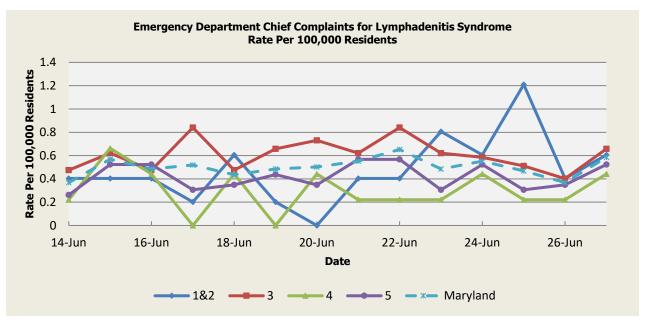


There was an appreciable increase above baseline in the rate of ED visits for Hemorrhagic Illness Syndrome on, 6/15 (Regions 1&2), 6/16 (Region 3), 6/20 (Regions 1&2). These increases are not known to be associated with any outbreaks.

	Hemorrhagic Illness Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2	3	4	5	Maryland		
Mean Rate*	0.05	0.17	0.04	0.15	0.14		
Median Rate*	0.00	0.11	0.00	0.09	0.10		

<sup>\*</sup> Per 100,000 Residents

# Lymphadenitis Syndrome



There was an appreciable increase above baseline in the rate of ED visits for Lymphadenitis Syndrome on, 6/23 (Regions 1&2), 6/25 (Regions 1&2). These increases are not known to be associated with any outbreaks.

	Lymphadenitis Syndrome Baseline Data January 1, 2010 - Present							
Health Region	1&2	3	4	5	Maryland			
Mean Rate*	0.39	0.60	0.40	0.39	0.49			
Median Rate*	0.40	0.55	0.44	0.35	0.45			

<sup>\*</sup> Per 100,000 Residents

## MARYLAND REPORTABLE DISEASE SURVEILLANCE

## Coronavirus Disease 2019 (COVID-19) Situation Summary

On March 5<sup>th</sup>, 2020, the Maryland Department of Health announced the first cases of coronavirus disease 2019 (abbreviated COVID-19) in the State of Maryland.

## Confirmed COVID-19 Case Counts in Maryland by County (As of July 2nd, 2020)

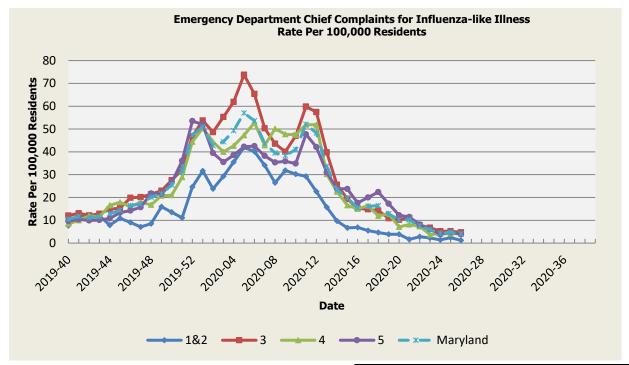
County	Number of
	<b>Confirmed Cases</b>
Allegany	205
Anne Arundel	5,179
Baltimore City	7,701
Baltimore County	8,105
Calvert	418
Caroline	321
Carroll	1,149
Cecil	486
Charles	1,416
Dorchester	189
Frederick	2,501
Garrett	11
Harford	1,153
Howard	2,602
Kent	201
Montgomery	14,899
Prince George's	18,731
Queen Anne's	232
Somerset	87
St. Mary's	646
Talbot	141
Washington	687
Wicomico	1,074
Worcester	289
Total	68,423

The most up-to-date information may be found on the Maryland Department of Health website at https://coronavirus.maryland.gov.

#### SYNDROMIC INFLUENZA SURVEILLANCE

Seasonal Influenza reporting occurs from MMWR Week 40 through MMWR Week 20 (October 2019 through May 2020). **Due to the COVID-19 pandemic, influenza reporting will be extended to the beginning of the 2020-2021 reporting season (MMWR Week 40/Week Ending October 3, 2020).** 

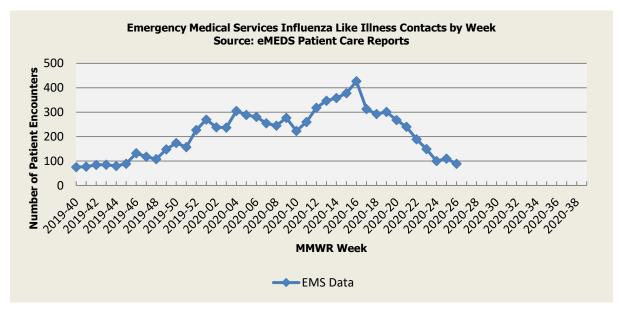
#### **Influenza-like Illness**



	Influenza-like Illness Baseline Data Week 1 2010 - Present					
Health Region	1&2	3	4	5	Maryland	
Mean Rate*	10.50	14.32	13.61	12.13	13.11	
Median Rate*	7.66	10.63	9.72	9.04	9.72	

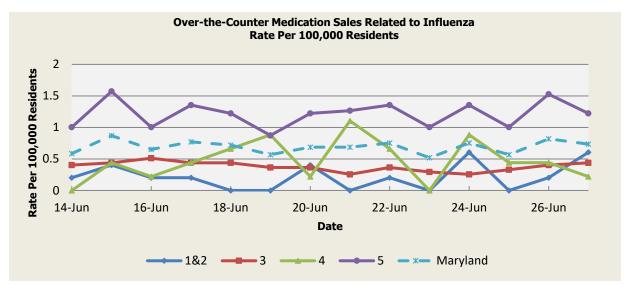
<sup>\*</sup> Per 100,000 Residents

# Influenza-like Illness Contacts by Week



**Disclaimer on eMEDS flu related data**: These data are based on EMS Pre-hospital care reports where the EMS provider has selected "flu like illness" as a primary or secondary impression of a patient's illness. This impression is solely based on the signs and symptoms seen by the provider, not on any diagnostic tests. Since these numbers do not include all primary or secondary impressions that may be seen with influenza the actual numbers may be low. These data are reported for trending purposes only.

## **Over-the-Counter Influenza-Related Medication Sales**

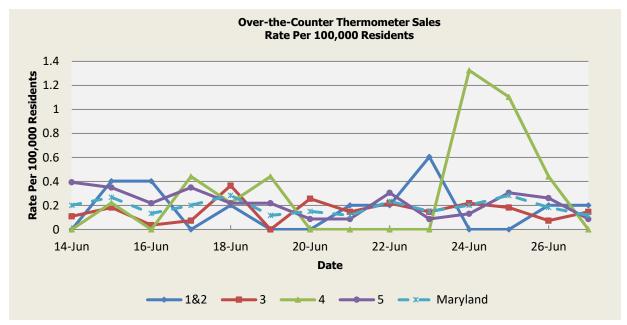


There was no appreciable increase above baseline in the rate of OTC Medication Sales during this reporting period.

	OTC Medication Sales Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	3.36	4.29	2.62	7.67	5.38
Median Rate*	2.62	3.36	2.21	6.90	4.62

<sup>\*</sup> Per 100,000 Residents

## **Over-the-Counter Thermometer Sales**



There was no appreciable increase above baseline in the rate of OTC Thermometer Sales during this reporting period.

	Thermometer Sales Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	2.80	2.66	2.14	3.53	2.96
Median Rate*	2.62	2.59	1.99	3.49	2.94

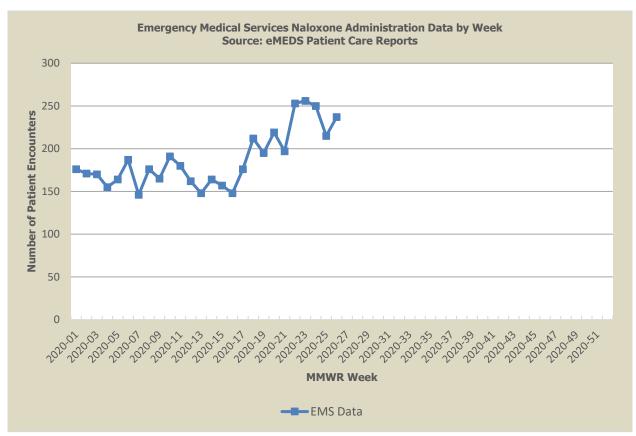
<sup>\*</sup> Per 100,000 Residents

#### SYNDROMIC OVERDOSE SURVEILLANCE

The purpose of this section is to characterize non-fatal ED visit trends for acute unintentional overdose by Heroin, Opioid or Unspecified substance among Maryland residents captured by ESSENCE data, including chief complaint and discharge diagnosis. ED visits that are identified as unintentional overdose by Heroin, Opioid or Unspecified substance include those with medical and non-medical use of a prescription Opioid or where the substance is not specified, given evidence that most fatal overdoses are Opioid-related.

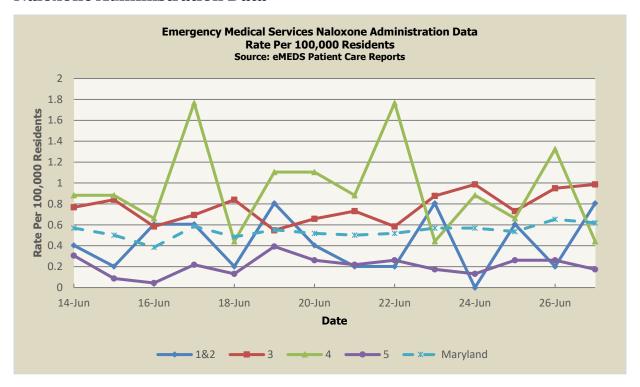
In preparation for the release of new ESSENCE queries for identifying heroin, opioid and all drug overdoses, please note that we have removed the data chart showing unintentional overdose rates by heroin, opioid, or unspecified substances. These new data, when available, will be presented below.

# Naloxone Administration Data by Week



**Disclaimer on eMEDS naloxone administration related data**: These data are based on EMS Pre-hospital care reports where the EMS provider has documented that they administered naloxone. The administration of naloxone is based on the patient's signs and symptoms and not on any diagnostic tests. These data are reported for trending purposes only.

## **Naloxone Administration Data**



**Disclaimer on eMEDS Naloxone administration related data**: These data are based on EMS Pre-hospital care reports where the EMS provider has documented that they administered naloxone. The administration of naloxone is based on the patient's signs and symptoms and not on any diagnostic tests. These data are reported for trending purposes only.

#### PANDEMIC INFLUENZA UPDATE / AVIAN INFLUENZA-RELATED REPORTS

**WHO update:** The current WHO phase of pandemic alert for avian influenza is ALERT. Currently, the avian influenza H5N1 virus continues to circulate in poultry in some countries, especially in Asia and northeast Africa. This virus continues to cause sporadic human infections with some instances of limited human-to-human transmission among very close contacts. There has been no sustained human-to-human or community-level transmission identified thus far.

Influenza A (H7N9) is one of a subgroup of influenza viruses that normally circulate among birds. Until recently, this virus had not been seen in people. However, human infections have now been detected. Presently, there is limited information about the scope of the disease the virus causes and about the source of exposure. The disease is of concern because most patients have been severely ill. There is no indication thus far that it can be transmitted between people, but both animal-to-human and human-to-human routes of transmission are being actively investigated.

**Alert phase**: This is the phase when influenza caused by a new subtype has been identified in humans. Increased vigilance and careful risk assessment, at local, national, and global levels are characteristic of this phase. If the risk assessments indicate that the new virus is not developing into a pandemic strain, a de-escalation of activities towards those in the interpandemic phase may occur. As of July 2nd, 2020, the WHO-confirmed global total (2003-2020) of human cases of H5N1 avian influenza virus infection stands at 861, of which 455 have been fatal. Thus, the case fatality rate for human H5N1 is approximately 53%.

#### **AVIAN INFLUENZA**

There were no relevant avian influenza reports this week

#### **HUMAN AVIAN INFLUENZA**

There were no relevant human avian influenza reports this week

#### NATIONAL DISEASE REPORTS

**CORONAVIRUS DISEASE 2019 UPDATE (USA),** 1 July 2020, as coronavirus [COVID-19] outbreaks are slowly brought to heel in many places around the world, the US is among a handful of countries facing a surge of new infections. Read More: <a href="https://promedmail.org/promed-post/?id=7528543">https://promedmail.org/promed-post/?id=7528543</a>

**RABIES** (**SOUTH CAROLINA**), 28 June 2020, Health officials in South Carolina say one person was exposed to a bat with rabies while administering care to it. [I am not quite sure what kind of care the person was administering, or if the bat was injured. - Mod.TG]. Read More: <a href="https://promedmail.org/promed-post/?id=7517123">https://promedmail.org/promed-post/?id=7517123</a>

**INVASIVE MOSQUITO** (**MICHIGAN**), 27 June 2020, Barely a month and a half after the invasion of the so-called "murder hornets," the Michigan Department of Health and Human Services (MDHHS) has identified specimens of the invasive and disease-carrying Asian tiger mosquito (\_Aedes albopictus\_) in Wayne County, the state's most populous county. Read More: <a href="https://promedmail.org/promed-post/?id=7517121">https://promedmail.org/promed-post/?id=7517121</a>

**CYCLOSPORIASIS** (**MULTISTATE**), 27 June 2020, CDC, public health and regulatory officials in several states, and the FDA are investigating a multistate outbreak of \_Cyclospora\_ infections linked to bagged salad mix containing iceberg lettuce, carrots, and red cabbage produced by Fresh Express and purchased at ALDI, Hy-Vee, Jewel-Osco, and Walmart stores in the Midwestern USA. Read More: <a href="https://promedmail.org/promed-post/?id=7516071">https://promedmail.org/promed-post/?id=7516071</a>

**SALMONELLOSIS** (**MULTISTATE**), 26 June 2020, As of 23 Jun 2020, a total of 465 people infected with one of the outbreak strains of \_Salmonella\_ have been reported from 42 states. Read More: <a href="https://promedmail.org/promed-post/?id=7513078">https://promedmail.org/promed-post/?id=7513078</a>

**RECREATIONAL WATERBORNE OUTBREAKS (MULTISTATE),** 26 June 2020, Outbreaks associated with fresh or marine (that is, untreated) recreational water can be caused by pathogens or chemicals, including toxins. Read More: <a href="https://promedmail.org/promed-post/?id=7512783">https://promedmail.org/promed-post/?id=7512783</a>

**MUMPS UPDATE (NEBRASKA),** 26 June 2020, The outbreak involved 62 cases linked to a single asymptomatic wedding attendee. Read More: <a href="https://promedmail.org/promed-post/?id=7511414">https://promedmail.org/promed-post/?id=7511414</a>

#### INTERNATIONAL DISEASE REPORTS

**ANTHRAX** (**ARGENTINA**), 1 July 2020, Again, after 42 years of permanent assessment of this zoonosis, we insist on the fact that "Only persevering in the vaccination of bovines on an annual basis and in efficiently eliminating the carcasses of dead animals, will facilitate the reduction of the load of \_Bacillus anthracis\_ spores on the soils, and will control this zoonosis." Read More: <a href="https://promedmail.org/promed-post/?id=7530202">https://promedmail.org/promed-post/?id=7530202</a>

**PLAGUE** (**MONGOLIA**), 1 July 2020. A suspected case of bubonic plague has been reported in western Mongolia, reported Xinhua news agency, based on a local media report on Tuesday [30 Jun 2020], which cites the country's National Centre for Zoonotic Diseases (NCZD). Read More: <a href="https://promedmail.org/promed-post/?id=7529689">https://promedmail.org/promed-post/?id=7529689</a>

**BOTULISM (UNITED KINGDOM),** 30 June 2020, In the 1980s I worked as a vet in the food hygiene and controls agency (at that time municipal) and one of the problems we had to help solve was contamination with spore-forming bacteria in cheese spread. Read More: <a href="https://promedmail.org/promed-post/?id=7525461">https://promedmail.org/promed-post/?id=7525461</a>

**CORONAVIRUS DISEASE 2019 UPDATE (CHINA),** 29 June 2020, if there is a paradise for SARS-CoV-2, it would probably be a slaughterhouse. Work units in meat plants are cooled to under 12 degrees Celsius [53.6 degrees Fahrenheit]. Workers stand near one another and sweat

as they labor under pressure - an ideal situation for viruses transmitted by droplets, aerosols, or contact. Read More: <a href="https://promedmail.org/promed-post/?id=7520442">https://promedmail.org/promed-post/?id=7520442</a>

CORONAVIRUS DISEASE 2019 UPDATE (GLOBAL), 26 June 2020, Globally, with 9 million confirmed COVID-19 cases and over 400 000 deaths reported to WHO, the pandemic continues to accelerate, with a record number of new coronavirus cases reported on Sunday [21 Jun 2020], with 183 020 confirmed in 24 hours. Read More: <a href="https://promedmail.org/promed-post/?id=7511839">https://promedmail.org/promed-post/?id=7511839</a>

**PLAGUE (DEMOCRATIC REPUBLIC OF CONGO),** 26 June 2020, Since 11 Jun 2020, a total of 29 plague cases have been reported in the Ituri endemic focus of Democratic Republic of Congo (DRC), Djugu territory. Read More: <a href="https://promedmail.org/promed-post/?id=7513771">https://promedmail.org/promed-post/?id=7513771</a>

### OTHER RESOURCES AND ARTICLES OF INTEREST

More information concerning Public Health and Emergency Preparedness can be found at the Office of Preparedness and Response website: <a href="http://preparedness.health.maryland.gov/">http://preparedness.health.maryland.gov/</a> or follow us on Facebook at <a href="http://www.facebook.com/MarylandOPR">www.facebook.com/MarylandOPR</a>.

More data and information on influenza can be found on the MDH website: <a href="http://phpa.health.maryland.gov/influenza/fluwatch/Pages/Home.aspx">http://phpa.health.maryland.gov/influenza/fluwatch/Pages/Home.aspx</a>

Please participate in the Maryland Resident Influenza Tracking System (MRITS): http://flusurvey.health.maryland.gov

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**NOTE**: This weekly review is a compilation of data from various surveillance systems, interpreted with a focus on a potential BT event. It is not meant to be inclusive of all epidemiology data available, nor is it meant to imply that every activity reported is a definitive BT event. International reports of outbreaks due to organisms on the CDC Critical Biological Agent list will also be reported. While not "secure", please handle this information in a professional manner. Please feel free to distribute within your organization, as you feel appropriate, to other professional staff involved in emergency preparedness and infection control.

For questions about the content of this review or if you have received this and do not wish to receive these weekly notices, please e-mail us. If you have information that is pertinent to this notification process, please send it to us to be included in the routine report.

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# Appendix 1: ESSENCE Syndrome Definitions and Associated Category A Conditions

Syndrome	ESSENCE Definition	Category A Conditions
Botulism-like	(Botulism or (DifficultyFocusing and DifficultySpeaking) or (DifficultySpeaking and DifficultySwallowing) or (DifficultySwallowing and DifficultyFocusing) or DoubleVision or FacialParalysis or GuillainBarre or Ptosis) and not GeneralExclusions	Botulism
Fever	(Chills or (FeverPlus and (Drowsiness or Seizure)) or FeverOnly or SepsisGroup or ViralSyndrome) and not GeneralExclusions	N/A
Gastrointestinal	(AbdominalCramps or AbdominalPainGroup or Diarrhea or FoodPoisoning or Gastroenteritis or GIBleeding or Peritonitis or Vomiting) and not (GeneralExclusions or Gynecological or Obstetric or Reproductive or UrinaryTract)	Anthrax (gastrointestinal)
Hemorrhagic Illness	(FeverOrChills and (AcuteBloodAbnormalitiesGroup or BleedingFromMouth or BleedingGums or GIBleeding or Hematemesis or Hemoptysis or Nosebleed or Petechiae or Purpura)) and not GeneralExclusions	Viral Hemorrhagic Fever
Localized Lesion	(Boils or Bump or Carbuncle or DepressedUlcer or Eschar or Furuncle or InsectBite or SkinAbscess or (SkinSores and not AllOverBody) or SkinUlcer or SpiderBite) and not (GeneralExclusions or Decubitus or Diabetes or StasisUlcer)	Anthrax (cutaneous) Tularemia
Lymphadenitis	(BloodPoisoning or Bubo or CatScratchDisease or SwollenGlands) and not GeneralExclusions	Plague (bubonic)
Neurological	(([Age<75] and AlteredMentalStatus) or (FeverPlus and (Confusion or Drowsiness or Petechiae or StiffNeck)) or Delirium or Encephalitis or Meningitis or UnconsciousGroup) and not GeneralExclusions	N/A
Rash	(ChickenPox or Measles or RashGeneral or Roseola or (Rubella and not Pregnancy) or Shingles or (SkinSores and AllOverBody) or Smallpox) and not GeneralExclusions	Smallpox
Respiratory	(Anthrax or Bronchitis or (ChestPain and [Age<50]) or Cough or Croup or DifficultyBreathing or Hemothorax or Hypoxia or Influenza or Legionnaires or LowerRespiratoryInfection or Pleurisy or Pneumonia or RespiratoryDistress or RespiratoryFailure or RespiratorySyncytialVirus or RibPain or ShortnessOfBreath or Wheezing) and not (GeneralExclusions or Cardiac or (ChestPain and Musculoskeletal) or Hyperventilation or Pneumothorax)	Anthrax (inhalational) Tularemia Plague (pneumonic)
Severe Illness or Death	CardiacArrest or CodeGroup or DeathGroup or (Hypotension and FeverPlus) or RespiratoryArrest or SepsisGroup or Shock	N/A

Appendix 2: Maryland Health and Medical Region Definitions

Health and Medical Region	Counties Reporting to ESSENCE		
	Allegany County		
Deciens 1 % 2	Frederick County		
Regions 1 & 2	Garrett County		
	Washington County		
	Anne Arundel County		
	Baltimore City		
Pagion 2	Baltimore County		
Region 3	Carroll County		
	Harford County		
	Howard County		
	Caroline County		
	Cecil County		
	Dorchester County		
	Kent County		
Region 4	Queen Anne's County		
	Somerset County		
	Talbot County		
	Wicomico County		
	Worcester County		
	Calvert County		
	Charles County		
Region 5	Montgomery County		
	Prince George's County		
	St. Mary's County		

